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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 020479005200

First Inventor

Ramadas, Krishna Kumar

Title

METHOD AND SYSTEM FOR ROUTE CONTROL AND
REDUNDANCY FOR OPTICAL NETWORK SWITCHING
APPLICATIONS

Express Mail Label No.

EL630582368US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning design patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification (Total Pages 24)
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the invention
 - Brief Summary of the invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C.113) (Total Sheets 15)
5. Oath or Declaration (Total Pages)
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

ACCOMPANYING APPLICATIONS PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. §3.73(b) Statement ☒ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
17. ☐ Other:

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: ____ /
Prior application information: Examiner: ____ Group Art Unit:

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

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or ☐ Correspondence address below

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Name

Address

City

State

Zip Code

Country

Telephone

Fax

Name (Print/Type)

Richard T. Ogawa

Registration No. (Attorney/Agent)

37,692

Signature

Date

8/15/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

Complete if Known**TOTAL AMOUNT OF PAYMENT** (\$) 395

Application Number	Unassigned
Filing Date	August 15, 2001
First Named Inventor	Ramadas, Krishna Kumar
Examiner Name	Unassigned
Group Art Unit	Unassigned
Attorney Docket No.	020479-005200US

METHOD OF PAYMENT		FEE CALCULATION (continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:		3. ADDITIONAL FEES	
Deposit Account Number	20-1430	Large Fee Code	Entity Fee (\$)
Deposit Account Name	Townsend and Townsend and Crew LLP	Small Fee Code	Entity Fee (\$)
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17			Fee Description
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			Fee Paid
2. <input type="checkbox"/> Payment Enclosed:		105	130
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other		127	50
FEE CALCULATION		205	65
1. BASIC FILING FEE		227	25
Large Fee Code	Entity Fee (\$)	139	130
Small Fee Code	Entity Fee (\$)	147	2,520
Fee Description	Fee Paid	112	920*
101	710	113	1,840*
106	320	115	110
107	490	116	390
108	710	117	890
114	150	118	1,390
SUBTOTAL (1)	(\$355)	128	1,890
2. EXTRA CLAIM FEES		119	310
Total Claims	15	120	310
Independent Claims	3	121	270
Multiple Dependent		138	1,510
Extra Claims	0	140	110
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Fee Paid	\$0	142	1,240
Independent Claims	0	143	440
Multiple Dependent		144	600
Extra Claims	0	122	130
Fee from below	\$40	123	50
Fee Paid	\$0	126	180
Independent Claims	0	581	40
Multiple Dependent		146	710
Extra Claims	0	149	710
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Fee Paid	\$0	169	900
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Multiple Dependent		The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.	
Extra Claims	0	*Reduced by Basic Filing Fee Paid	
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